



DECLARATION and POWER OF ATTORNEY

RECEIVED

FEB 21 2003

Attorney's Docket No. US01064 OFFICE OF PETITIONS

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled VIDEO MONITORING AND SURVEILLANCE SYSTEMS CAPABLE OF HANDLING ASYNCHRONOUSLY MULTIPLEXED VIDEO.

_____ the specification of which (check one)

_____ is attached hereto.

☒ was filed on December 28, 2001 as Application Serial No. 10/034,670 and was amended on

_____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by the amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulation, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

COUNTRY	APPLICATION NUMBER	DATE OF FILING (DAY, MONTH, YEAR)	PRIORITY CLAIMED UNDER 35 U.S.C. 119

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35 United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

PRIOR UNITED STATES APPLICATION(S)

APPLICATION SERIAL NUMBER	FILING DATE	STATUS (PATENTED, PENDING, ABANDONED)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.


POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

Jack E. Haken, Reg. No. 26,902

Michael E. Marion, Reg. No. 32,266

Michael E. Schmitt, Reg. 36,921

<p>SEND CORRESPONDENCE TO:</p> <p>Corporate Patent Counsel;</p> <p>Philips Electronics North America Corporation; 580 White Plains Road;</p> <p>Tarrytown, NY 10591</p>	<p>DIRECT TELEPHONE CALLS TO:</p> <p>Edward W. Goodman Reg. No. 28,613</p> <p>(914) 333-9611</p>
---	--

Dated: 10/14/02		INVENTOR'S SIGNATURE: 	
Full Name of Inventor	Last Name COLMENAREZ	FIRST NAME ANTONIO	Middle Name J.
Residence & Citizenship	City Maracaibo	STATE OR FOREIGN COUNTRY VENEZUELA	Country of Citizenship Venezuela
Post Office Address	Street Av. 11 Calle 86A # 86A-20 Sector Nueva Beloso	CITY MARACAIBO	State or Country Venezuela
			Zip Code

Dated:		INVENTOR'S SIGNATURE:	
Full Name of Inventor	Last Name GUTTA	FIRST NAME SRINIVAS	Middle Name
Residence & Citizenship	City	STATE OR FOREIGN COUNTRY	Country of Citizenship
Post Office Address	Street 80 Tate Ave. Apt. #2	CITY BUCHANAN	State or Country New York
			Zip Code 10511

Dated:		INVENTOR'S SIGNATURE:	
Full Name of Inventor	Last Name TRAJKOVIC	FIRST NAME MIROSLAV	Middle Name
Residence & Citizenship	City	STATE OR FOREIGN COUNTRY	Country of Citizenship
Post Office Address	Street 381/2 Wolden Road, Apt. C-2-11	CITY OSSINING	State or Country New York
			Zip Code 10562

Dated:		INVENTOR'S SIGNATURE:	
Full Name of Inventor	Last Name	FIRST NAME	Middle Name
Residence & Citizenship	City	STATE OR FOREIGN COUNTRY	Country of Citizenship
Post Office Address	Street	CITY	State or Country
			Zip Code